



COMMONWEALTH OF MASSACHUSETTS  
EXECUTIVE OFFICE OF ENERGY & ENVIRONMENTAL AFFAIRS  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
ONE WINTER STREET, BOSTON, MA 02108 617-292-5500

DEVAL L. PATRICK  
Governor

TIMOTHY P. MURRAY  
Lieutenant Governor

IAN A. BOWLES  
Secretary

ARLEEN O'DONNELL  
Commissioner

## **Lead in Drinking Water @ Schools & Child Care Facilities Program**

### **Form for Co-located Schools and/or Programs**

**Use when one of the Co-located Schools/Programs has already  
submitted a MassDEP Drinking Water Program  
- Lead in Drinking Water Maintenance Checklist to MassDEP**

If your school/program is co-located [share the same facility] at a school that has already submitted a Lead in Drinking Water Maintenance Checklist to MassDEP you may submit this form in lieu of the checklist. Your school will be linked in our database to the school/program that you list on the Co-located form and we will report the status of your school/program with respect to the Lead in Drinking Water @ Schools & Child Care Facilities based on the current submission (and future submissions) of the school/facility you list on the form. If your school/program falls into one of the following scenarios please submit the attached form.

- 1.) An after school program is located at an elementary school and all the Facilities used by the after school program are covered by the Checklist already submitted by the elementary school.
- 2.) A Checklist for the St ABCDE Elementary school was submitted to MassDEP and a Pre-School program and After School Program utilize the same facilities as those covered by the Checklist submitted for the school.
- 3.) A contractor is hired by the school district to offer SPED classes at schools in the district. The schools already have submitted their Checklists to MassDEP.

**Form for Schools and/or Programs that are Co-located at a School/Facility that has submitted a  
Lead in Drinking Water Checklist**

**Please make as many copies of this form as needed for the Schools/Programs under your  
supervision as necessary**

The \_\_\_\_\_ is  
**Name of School / Program (school/program submitting this form)**

located at/ within the \_\_\_\_\_  
**School/Program that has submitted its Lead in Drinking Water  
Checklist to MassDEP**

at \_\_\_\_\_ in \_\_\_\_\_.  
**Street Address City/ Town**

I \_\_\_\_\_-have checked and  
**Principal/Director/Administrator  
– School/Program submitting this form)**

confirmed with the responsible party at the School/Facility where our school/program operates that a Lead in Drinking Water Checklist has been submitted to MassDEP (you need to obtain a copy of the checklist that was submitted, any test results and outreach material sent to parents and staff for your records) and that the sampling program for Lead in Drinking Water at this School/Facility includes ALL the areas used by my School/Program.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_      \_\_\_\_\_  
**Title Date**  
**Principal/Director submitting this form**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_      \_\_\_\_\_  
**Title Date**  
**Principal/Director School/Program that has submitted a Checklist to MassDEP**

**A copy of this completed form needs to be kept by both Schools/Programs with their Lead in  
Drinking Water @ Schools & Child Care facilities records (at their site).**